

JUNE

SIXTH YEAR — No. 63

International Review of the Red Cross



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The French edition of this Review is issued every month under the title of *Revue internationale de la Croix-Rouge*. It is, in principle, identical with the English edition and may be obtained under the same conditions.

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GERMAN

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THE SIGNIFICANCE OF THE UNIVERSAL DECLARATION OF HUMAN RIGHTS

THE RECORD SO FAR AND FUTURE PROSPECTS ¹

by A. Verdoodt

On the 10th December 1948, the General Assembly of the United Nations adopted the Universal Declaration of Human Rights which had been drawn up by a series of meetings of the Commission of Human Rights and the Commission on the Condition of Women as well as major discussions which took place during the first seven sessions of the Economic and Social Council. The General Assembly presented this Declaration "as a common standard of achievement for all peoples and all nations to the end that every individual and every organ of society, keeping this Declaration constantly in mind, shall strive by teaching and education . . . and by progressive measures, national and international, to secure their universal and effective recognition and observance . . ." ²

¹ The Universal Declaration of Human Rights, as we all know, springs from the same ideal as the founding and growth of the Red Cross. In fact, this Declaration, signed in 1948, has much in common with the Geneva Conventions which, originating in the last century, attained the most advanced stage of their development in 1949.

Mr. Albert Verdoodt is the author of a recently published book worthy of note entitled *Naissance et signification de la Déclaration universelle des droits de l'homme*, which was commented on by the International Review in its August 1965 issue. In this book, the author points to the general trend of efforts since the Second World War towards the safeguarding of essential human rights in all circumstances in time both of war and of peace. The review *World Justice* (Louvain, December 1965) has just published a further study by Mr. Verdoodt on the same subject, and we have pleasure in quoting the gist thereof. (*Ed.*)

² Preamble to the Declaration.

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Do we consider that the decision taken on this document really corresponds to the breadth of the aims affirmed in this preliminary phrase? First of all, is it a standard?

Brief Description of the Declaration

The Declaration has been compared by Professor R. Cassin, one of its principal authors, "to the vast portico of a temple of which the forecourt is the preamble affirming the unity of the human family and the foundations are the general principles of freedom, equality, nondiscrimination and brotherhood proclaimed in Articles 1 and 2. Four pillars of equal importance support the portico. The first is that of personal rights and freedoms (Articles 3-11 inc.): life, freedom, security and dignity of the person, equal protection of the law, guarantees against slavery, torture, arbitrary arrest and punishment, legal remedies against abuse. The second pillar concerns the rights of the individual in his relationship to the groups of which he is a part and the external world (Articles 12-17 inc.). Men and women are entitled, on an equal footing, to marry, to found a family, to have a home, a residence and asylum against persecution. Every human being has the right to be the member of a city or the national of a country and to control the things which have become his property.

The third pillar is that of the spiritual capacities, public freedoms and fundamental political rights (Articles 18-22): freedom of conscience, thought and religion; freedom of word, expression, assembly and association, the right to take part in government, to participate in periodic and genuine elections. The will of the people is proclaimed as the basis of government authority. The fourth pillar, symmetrical with the first, the strength of which is in no way inferior to the others, is that of economic, social and cultural rights (Articles 22-27 inc.): the right to work, to free choice of employment, to social security and trade union freedoms; the right to education and leisure, to cultural life and protection of intellectual and artistic creation.

On these four pillars a pediment had to be placed, denoting the links between the individual and society. Articles 28-30 affirm the necessity for an international social order so as to find for the rights

and freedoms of the human person their full effect within it. They also proclaim the existence of the duties of the individual towards the community; he must respect the rights and freedoms of others; he may not attack the just requirements of morality, public order and welfare in a democratic society, nor the aims and principles of the United Nations. Thus the Declaration does exemplify the continued impetus of the individual towards the social being".¹ This magnificent description leaves no doubt as to the quality of the 'standard' which the Declaration claims to represent.

Universality of the Declaration

But is this standard really valid 'for all peoples and all nations, to the end that every individual and every organ of society keep this Declaration constantly in mind . . .'?

Here we come to the question of its universal character. 'In fact', M. Cassin continues, 'the Declaration is novel in that it formulates those rights which no national law has been able to formulate except by reference to a given country. Article 15, for instance, provides 'that everyone has the right to a nationality'. Now, a nation has no authority to decree that everyone has the right to be attached to a nation. It also happens that certain constitutions recognise the right to asylum on the territory of the country in question of those who are persecuted in the cause of freedom. But only the United Nations had the power to formulate a general principle, as in Article 14, para. 1: 'Everyone has the right to seek and to enjoy in other countries asylum from persecution'.

How fruitfully the universal character of the Declaration could be applied in relation to 'the status of the foreigner' in a given country. Article 6 provides that everyone has the right to recognition everywhere as a person before the law. The Declaration does not specifically recognise any differences in favour of the national of a country, as against a foreigner, except the right to return to his country (Article 13, para. 2), that of taking part in government in his country or the right of equal access to public service in his country (Article 21, paras. 1 & 2) '.

¹ *Collected lectures*, 1951 (II), Academy of International Law, The Hague, pp. 340-345.

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The Limits of the Declaration

It must not, however, be forgotten that the General Assembly did not wish to define the practical measures of application. We shall say a word later about the real influence of the Declaration. But on the level of principles, the United Nations has ignored rights as important as those of petition, of minorities, the right to the free development of national communities in those countries which contain several, or the freedom to emigrate. With regard to this last right, Article 13 simply says: ' § 1 Everyone has the right to freedom of movement and residence within the borders of each state. § 2 Everyone has the right to leave any country, including his own, and to return to his country '.

Reference to the doctrine of the Catholic Church shows a parallel wording in the Encyclical ' *Pacem in terris* ', which in fact covers almost all the rights contained in the Universal Declaration. It is even more explicit, declaring: ' Everyone has the right to freedom of movement and residence within the political community of which he is a citizen; he also has the right, as long as his reasons are valid, to go abroad and to reside there. Membership of any particular political community must never prevent anyone from being a member of the human family and a citizen of that universal community where all men are joined by common bonds '. This last explanatory phrase is further reinforced by another passage of the Encyclical which says: ' It is also a right inherent in the human person that he be permitted to travel to any country where he hopes to find living conditions more suitable for himself and his family. It is therefore incumbent on governments to welcome immigrants...'

The Practical Influence of the Declaration

Of course, there is still the fundamental question of the effective guarantee of these human rights. In 1950, 1958 and 1962 the United Nations published records of the principle manifestations of the influence of the Declaration ¹.

First of all, in the international institutions; the Declaration was invoked and its violation regularly denounced by the organs of the United Nations and their special institutions.

¹ *The Universal Declaration of Human Rights. A Standard of Achievement*, U.N., N.Y., 1950; id. 1958; id. 1962.

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For instance, there was Resolution 1514 of the 15th General Assembly on granting independence to the Colonial countries and peoples. Paragraph 7 of that Resolution demands that 'all states faithfully and strictly observe the provisions of the Charter of the United Nations and of the Universal Declaration of Human Rights'.

With regard to the legal value of the Declaration, we will simply quote a recent memorandum by the Legal Department of the United Nations which reads: 'According to the practice of the United Nations Organisation a 'Declaration' is a formal and solemn instrument justified on rare occasions when principles of great importance and lasting value are being announced, as in the case of the Declaration of Human Rights. A recommendation is less formal.' Apart from the distinction just indicated, there is probably no difference from the strictly legal standpoint between a 'recommendation' and a 'declaration' in the practice of the United Nations. A 'declaration' or 'recommendation' is adopted by a body of the United Nations. As such, it cannot be made binding on the member-states in the sense in which a treaty or a convention is binding on the parties to that treaty or convention, by the simple artifice of calling it a 'declaration' rather than a 'recommendation'. However, in view of the greater solemnity and significance of a 'declaration', it may be considered that the organ which adopts it thus shows its lively hope that the member of the international community will respect it. Consequently, to the extent to which this hope is gradually justified by the practice of the nations concerned, a declaration may be considered, by custom, as setting out rules which are binding on governments¹. Moreover, the European Convention on Human Rights, the obligatory character of which is not questioned by any of the signatory nations, clearly recognises in its preamble that it is an off-spring of the Universal Declaration. The progress made by the idea of regional supervision of the rights of man within the Organisation of American States, owes a great deal to the influence of the Universal Declaration.

The programmes of technical co-operation with the developing countries, the rate of which is constantly increasing, are familiar with the dynamism initiated by the proclamation of universal eco-

¹ Document E/CN.4/L.610.

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conomic and social rights, and constitute a concrete factor in its implementation.

On their part, those nations which have recently gained their independence and those which have joined the United Nations since the Declaration was adopted, have affirmed their readiness to conform to the Universal Declaration, either in their Constitution or in unilateral declarations or in conventional acts.

As to practical influence on legislation, administration and even national legislatures, the cases where this has occurred have been extremely numerous.

It is above all important to emphasise that the Commission of Human Rights received a mandate in 1946 to prepare not only the Declaration but one or more Pacts of Human Rights intended to implement, under international supervision, the general principles proclaimed in the Declaration. And in fact between 1948 and 1954 the Commission drew up such Pacts, despite all the difficulties inherent in enterprises of this nature. Since 1954 the General Assembly itself, and its Third Commission in particular, have been slowly but surely promoting the implementation of the Pacts. Let us note that in order to make this operation possible the Commission had to submit to the General Assembly not one Pact but two. The first relates to civil and political rights, while the second Pact relates to economic, social and cultural rights.

It must not be forgotten that a large number of nations were born after the Declaration of Human Rights had already been in existence for a long time. The slowness of the discussions and decisions on the Pacts will at least have enabled these young nations to get to know them better, to familiarise themselves with their contents and their future mechanism, to contribute to their composition and to be more clearly aware of the scope of the undertakings they imply for those who decide to sign them.

Important as they are, there has been no question of waiting for a decision on the Pacts, imminent as it is, before making certain parts of the Declaration obligatory by means of multilateral agreements of limited scope. We may quote the International Convention on the Prevention and Punishment of the Crime of Genocide (1948), the Protection of Refugees and the Expatriated and the Prevention of Expatriation (1951, 1954), the Political Rights of Women

(1952), the Nationality of Married Women (1957), the Convention for the Abolition of Repression and Slavery in all its forms (1951), the three Conventions adopted by the International Labour Conference, one on Equal Pay for Equal Work as between men and women (1951), the second on the Abolition of Forced Labour (1957) and the third on Discrimination in Employment and Profession (1958), as well as the Universal Agreement adopted by U.N.E.S.C.O. on Authorship Rights (1952) and the one directed against Discrimination in Education (1962). Discussion of a Convention on Racial Discrimination has just ended and another is planned on Religious Intolerance. Many of these agreements have been successfully ratified and applied.

The Responsibility of the Educators

M. Cassin rightly commented ¹ 'the preamble to the Declaration mentions national and international measures only secondarily. It puts first . . . the obligation on individuals and every organ of society (nations, territorial groups and other social groups) to strive by teaching and education to promote respect for these rights and freedoms . . . It is not without reason that the preamble refers to both teaching and education: it is in fact education which exercises the most influence on the mentality of human beings, for it is not limited to lessons and pedagogic conferences which are often formal and sometimes tedious. In fact, the child is educated by the whole complex of the social and family milieu in which he lives and not simply by a particular teacher. Public services, cultural and economic groups therefore have a high task to fulfil'.

It is interesting to mention here that in May 1953, the North American delegates to the Commission of Human Rights submitted a series of proposals which envisaged:

1. An annual report to be made by each government on the status of the rights of man in his country;
2. Studies on the various aspects of the rights of man throughout the world;
3. Advisory services on the rights of man in form of seminars, study and research grants.

¹ *U.N. Review*, Sept. 1958, p. 8.

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The proposal on the advisory services was the first to be approved by the Commission and the General Assembly. Later, dozens of scholarships were granted by the United Nations in spheres relating to the rights of man ¹. Moreover, some 20 seminars were organised in various parts of the world under the auspices of important people in a certain number of countries. These constituted a meeting ground between representatives of the public and private sectors and the officials of the United Nations who are experts on matters concerning the rights of man. Their printed reports contain ideas which are very useful to governments and public opinion.

The American proposals on the reports on human rights and the studies were not accepted by the General Assembly until 1956. It was felt that triennial reports would be adequate. In the first series, which referred to the years 1954-1956, there were replies from 41 governments, including all the permanent members of the Security Council. The second series, covering the years 1957-1959, includes the reports of 66 governments. Of course, there is no guarantee that the information reported is a faithful reflection of the status of human rights in the various parts of the world at a given moment. The sources are, in fact, limited to government departments. But at least we can say that their effect is to make every government face up to its responsibilities and to lead it to some extent to compare its legislation with the Universal Declaration.

A reason of the same nature tends to cast doubt on the real value of the study programme on characteristic features of human rights. The Commission did in fact reject a proposal presented by a delegate of the United States which suggested entrusting the studies to a private person. This refusal betrays a deep mistrust of independent studies. We may recall that the first subject of enquiry, carried out by a Committee of four members of the Commission referred to Article 9: ' No-one shall be subjected to arbitrary arrest, detention or exile '. The second subject covers ' the right of arrested persons to communicate with those whom it is necessary for them to contact to ensure their defence or the protection of their essential interests '.

¹ We would also mention that the Council of Europe devotes a number of research scholarships to the same subject.

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From the point of view of the value of the information, the studies of the Sub-Committee on the Abolition of Discriminatory Measures and the Protection of Minorities, are in striking contrast to the previous example. These studies are in fact the work of individual reporters. Take, for instance, the work of M. Charles Ammoun (Lebanon) on Discriminatory Measures in Teaching, that of M. Arcot Krishna Swami (India) on Religious Freedom, the study of Discriminatory Measures in the Sphere of Political Rights by M. Hernan Santa Cruz (Chile) and a study on discrimination with regard to ' the right of every individual to leave a country including his own and to return to his own country ' by M. José De Ingles (Philippines).

Conclusion

The least that can be said in conclusion is that international law which, over the centuries, has simply tried to organise relationships between nations, is progressively giving more thought to certain human rights. Are these rights any the better for it? This question, which is as wide as the world, might receive quite an accurate answer if the recommendation recently adopted by the Commission on Human Rights is implemented. The latter looks to the meeting in 1968 of a World Conference to evaluate the progress achieved in the sphere of human rights since the Universal Declaration was adopted, in order to assess the techniques used in this matter by the United Nations and to draw up a programme of additional measures. Private studies devoted to the application of the Declaration could very usefully supplement this official picture.

Undoubtedly one may regret the extraordinary slowness with which the work of the United Nations has progressed, especially with regard to the Implementation Pacts. The resistance of certain nations justifies, at least a posteriori, the relative speed employed in preparing and voting on the Declaration alone. It is in fact a matter of the utmost importance to define the rights—and also the duties—of human beings, even if this knowledge helps only indirectly to restrain abuses and guide legislatures. The Ten Commandments are violated every day, yet they continue to influence even those who violate them!

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Finally, it is realistic to consider that the governmental delegates sitting at the United Nations and entrusted with the composition of the implementation agreements are not generally enthusiastic about a task the ultimate object of which is to place them under the supervision of the international community! Finally, it will still be individuals, non-governmental groups, the press and organs of public opinion who will have to be most zealous in invoking human rights and denouncing any state opposed to effective respect for them.

Albert VERDOODT

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Disabled Persons' Co-operatives in Czechoslovakia

by Rudolf Tyl

Over the last few years there has evolved a new attitude towards the disabled. Rehabilitation no longer means a course of therapy, but full reintegration of the disabled to daily life, and this is increasingly the attitude of those in charge of vocational rehabilitation workshops, of rehabilitation technicians, doctors and also organizations of disabled persons. The International Labour Review¹ recently published an article on this subject and—by kind permission—we are pleased to reproduce it here, for it describes the efforts being made so effectively in Czechoslovakia to enable the disabled to carry on an occupation.

Such initiative truly reflects the same humanitarian spirit as the Red Cross which constantly struggles to ensure that the human being, whoever he might be, shall preserve his dignity. The Review itself has on several occasions devoted articles to the problem of the protection, training and rehabilitation of the disabled². (Ed.).

The Czechoslovak Socialist Republic is a country with a high standard of social security, particularly as regards the welfare of the disabled. Conditions are provided that enable the handicapped to enjoy full social security rights on equality with other citizens. They are also in actual practice guaranteed full civil rights: the right to work, to rest after work, to health protection, to material security in case of illness and old age, and to education. Free preventive and therapeutic medical care is available to practically 99 per cent. of the entire population and includes not only actual treatment but also medicines, medical and prosthetic aids, etc.

There are pensions for the most seriously handicapped people, such as the blind and persons with major orthopaedic defects,

¹ Geneva, February 1966.

² In particular, see *Revue internationale*, August 1946, April and May 1949, and March 1961.

irrespective of whether the disability arises in connection with the person's employment or in an earlier part of his life, or whether it has existed since his birth. The calculation of the disability pension especially favours the younger age groups. The social security pattern includes not only pension insurance but also full social welfare care—care for citizens with a reduced working capacity, institutional care and supplementary care, carried out by local government authorities known as National Committees. Vocational rehabilitation is co-ordinated with therapeutic and social rehabilitation as their logical sequel. Rehabilitation also includes education and training within the framework of the national system of schools, and other educational facilities, where children and juveniles with sensory and physical defects are prepared for their future occupations.

Employment for the disabled

This fact, however, does not free the State from the responsibility of providing employment opportunities for the handicapped. More and more disabled persons are taking up employment because of the general shortage of manpower in the country and of the fact that, as a matter of principle, a disability pension under the appropriate legal regulations is not subject to any deduction when the recipient is in employment.

After the Second World War it was necessary to find work for many persons of productive age who had been injured or disabled. Furthermore, employment had to be found every year for young disabled persons graduating from a number of training and educational centres. In view of the specific conditions necessary before disabled persons can join in the labour process, a suitable sector of production had to be chosen in which such conditions could be created for handicapped workers.

In the second half of 1949, therefore, appropriate steps were taken for the employment of invalids in the workshops of the co-operatives, which form an important part of the national economy in Czechoslovakia. At the beginning of 1950 the first producer co-operatives for disabled persons came into being, their rules of employment having been suitably adapted to the difficult task of employing the disabled.

Growth of disabled persons' co-operatives

To illustrate the progress of the scheme, let us take as an example the development of the largest people's producer co-operative, the *Drutěva* in Prague (the name is an abbreviation of the Czech for "co-operative society of physically disabled persons"). The beginnings were very difficult. Neither workshops nor branches of production were suited to the employment of disabled persons, particularly those with a high percentage of disability. There was also a lack of experience. However, the *Drutěva* took over the complete production of brushes and baskets by blind persons, as well as the workshops for the disabled that had been established before the Second World War by disabled persons' associations. This was the basis on which the co-operative started. Its workshops were situated not only in Prague but also in Brno and in other towns throughout the Republic. The attraction of good working conditions and, particularly, the possibility of obtaining home work (which is given out on a large scale to invalids) led to an increase in the co-operative's membership to 1,400 persons.

Since the management of a co-operative with many workshops at different places was very difficult, it was found necessary to divide them between three new co-operatives. The principal one remained in Prague, while a second similar co-operative with the same name was set up in Brno, famous for its fairs, and the third in Jablonec nad Nisou (Northern Bohemia). This aroused interest in the other regions of the Republic, and as a result several more co-operatives of disabled persons were established under the aegis of the Central Union of Producer Co-operatives. This development was encouraged by the special conditions and advantages created for co-operatives of this type, particularly as regards the allotment of investment capital, priority in supply of material, price policy, allocation of workshops, selection of suitable branches of production, and exemption from co-operative income tax.

At present there are 46 disabled persons' co-operatives in operation in the Republic; they have nearly 15,000 members—11.5 per cent. of the total membership of the producer co-operative movement.

The producer co-operatives of disabled persons specialise in metal-working, furniture, toys and baskets, machine and hand-

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knitting, weaving, clothes (including children's wear and the mending of underwear), leather goods (including repairs), gifts and souvenirs, small items of glassware, Christmas-tree decorations, artistic ceramics, various card-board products, etc. Thirteen of these co-operatives offer services such as the safe custody of various objects; parking lots; repair and tuning of musical instruments; the repair of fountain pens, lighters, toys, umbrellas, garments and underwear; and various photographic services.

The regulations governing disabled persons' co-operatives are similar to the rules of other producer co-operatives, but contain additional provisions with regard to their character and specific purpose. The cost of a member's share in the disabled persons' co-operatives is substantially lower than in the other producer co-operatives.

The preferential treatment enjoyed by disabled persons' co-operatives in the allocation of capital has been very advantageous to them in capital construction. The Drutěva co-operatives in Prague and Brno were the first two to start the construction of new premises. In 1961 new workshops were put into operation, which brought about a gradual concentration of production and consequently higher productivity of labour and better economic results. A new workshop in Prague is to be completed in the near future. The construction of new workshops has resulted in a further expansion of the two largest co-operatives of disabled persons, so that at present the Prague Drutěva has over 1,500 workers, while that at Brno has about 800. Such progress is not exceptional, for a number of other co-operatives have also built new workshops. The blind are catered for by highly specialised co-operatives that have dormitories for their members, and the largest co-operatives in Prague, Brno and Bratislava provide separate workshops for blind workers, with specially favourable working conditions and facilities for cultural and social life.

The products made by the disabled workers of the Prague Drutěva have become very popular with all sections of the population and there is a considerable demand for womens' knitted wear, womens' and men's sweaters and cardigans, cashmere scarves, leather goods, fashion accessories, sports wear and other goods bearing the Drutěva mark. The annual fashion shows organised by the Prague

Drutěva attract great interest and virtually set the fashion in knit-wear garments. The high standard of the articles produced by the largest disabled persons' co-operatives depends on the use of the most up-to-date machines in workshops that are very well equipped technically.

Homeworkers

Homeworkers, who are specially trained and who account for about 50 per cent. of all the worker-members of disabled persons' co-operatives (as in the Prague Drutěva, for example), also have an excellent standard of work. For the most seriously handicapped homeworkers the raw material is brought to their door and the finished product taken away by the co-operative's own transport. Other homeworkers are expected to call personally at headquarters to collect the material they need and to bring the finished product back to it. During the hours when the homeworkers call for these purposes the spacious hall of the new building of the co-operative in Prague resembles a busy day at the stock exchange or in a bank. The homeworkers do not only receive the necessary materials: all other essentials, such as instructions, patterns, etc., are also carefully prepared for them beforehand.

There is no doubt that the seriously handicapped have received great assistance from the home work organised by these co-operatives. Such persons, since they work at home, can adapt the speed of their work to their physical condition, may perhaps be able to put aside their orthopaedic aids, and divide the working day according to their needs. This form of employment is particularly advantageous to people whose mobility is limited and who would find it difficult to get to the workshops. Well-organised home work undoubtedly has a favourable influence on the workers' efficiency and especially on their psychological condition.

Welfare facilities

Great attention is paid by disabled persons' co-operatives to cultural and social activities. The co-operatives provide libraries and works clubs, where the cultural and social life of the members is organised. The members are encouraged to join together in

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cultural groups for such things as photography, chess, sports, tourism, etc. The Prague Drutěva, for example, has set up a members' club and a cafeteria where the workers can have their meals. Considerable interest has also been attracted by its musical ensemble, its blind members' choir and its sports group for tourism and camping. The costs incurred in connection with these activities are defrayed out of the co-operative's special fund, to which a certain percentage of the profits is regularly allocated.

Special attention is paid to periodic medical check-ups and health care in general. Preventive medical examinations are carried out regularly and on their basis various measures are taken: treatment, transfer to another branch of production, recommendation of a shorter working day, reservation for spa treatment, etc. Medical care comes under the state health administration. Several disabled persons' co-operatives have recently been selected to be the centre of a complete health service.

Holidays may be spent either in the co-operatives' own establishments or elsewhere. Usually there is a programme of cultural events, and medical attention is always available. The cultural programmes are arranged so as to enable all the holiday-makers to take part in them. These vacations last for a fortnight. For blind members special holiday programmes are organised in the capital of the Republic.

Recruitment and training

The recruitment of disabled persons for the co-operatives is carried out in close co-ordination with the social welfare departments of the Councils of National Committees which decide, on the basis of medical examination and recommendation, whether or not the disabled person concerned is fit for employment. The decisive criterion is the percentage and the nature of the disability of the individual. The place of work is chosen to aid physical rehabilitation and to prevent any deterioration of health.

To improve the care of the disabled in general, the Research Institute of the State Social Security Board carries out systematic studies of the influence of certain kinds of work on their health. The findings of such research serve as a basis for standardising certain jobs suitable for disabled workers. Special arrangements

DISABLED PERSONS' CO-OPERATIVES IN CZECHOSLOVAKIA

at the places of work are recommended, including appropriate adaptations of equipment and the use of special materials and tools.

Some of the larger disabled persons' co-operatives have their own apprentice training centres, in which they educate and train juveniles for their own needs. For example, the Prague Drutěva has an apprentice training centre for dressmaking. The education of apprentices selected from among disabled juveniles is organised at special apprentice training centres that have hostels. The co-operative itself organises various courses: general training, safety at work, new working methods, etc. Attendance is voluntary and free of charge.

* * *

All problems concerning disabled persons are considered jointly by the boards of co-operatives at all levels and the nation-wide Union of Czechoslovak Disabled Persons. This collaboration is particularly fruitful in finding new branches of production suitable for handicapped workers, ensuring that the necessary workshops are available, recruiting new workers for the co-operatives and organising social activities for their members. This joint action will be further expanded in the future because the Central Union of Producer Co-operatives is taking over 45 workshops operated by the Union of Czechoslovak Disabled Persons with almost 3,000 employees, most of whom are seriously handicapped and cannot be employed at normal places of work. These workshops are to be merged with several co-operatives in which special attention is to be paid to the social aspects of the employment of the handicapped. By doctor's recommendation, disabled persons will have shorter working hours, individual working norms, special health care, rest periods during working hours, transport to and from the place of work, etc. Deficits incurred by the co-operatives will be defrayed by the State. This arrangement enables even the most severely handicapped person to join the work process.

Rudolf TYL

President of the Union of Czechoslovak
Disabled Persons

INTERNATIONAL COMMITTEE OF THE RED CROSS

EXTERNAL ACTIVITIES

Vietnam

Medical teams at work.—Welcomed by the delegation of the International Committee of the Red Cross, the medical team of the Swiss Red Cross arrived in Saigon then flew to Kontum on the high central plateau. It consisted of nine persons to whom one more was added a few days later. These ten doctors, male nurses and nursing sisters immediately set to work at the Kontum hospital.

Although this team is acting independently of the ICRC delegation, it maintains close contact with it. A member of the delegation has visited Kontum where, in co-operation with the Swiss Red Cross it distributed relief, such as blankets and clothing offered by the Swedish Red Cross for the refugees, as well as material to equip a dispensary at Dak-To, North of Kontum.

Another National Society, the Red Lion and Sun of Iran, has also sent a medical team to Vietnam. Comprising some twenty members, it is located at the Bentré hospital in Kien-Hoa Province (Mekong delta). There are about 140 patients undergoing treatment at that hospital, many of whom being direct victims of the war, such as amputated cases and those suffering from burns and wounds. Five ICRC delegates, accompanied by representatives of the Red Cross of the Republic of Vietnam, recently visited the Iranian team and observed that it was carrying out its task with efficiency and devotion. They handed over to it some thirty flasks of blood plasma offered by the Netherlands Red Cross.

In addition to the direct victims of the events, the Iranian surgeons have had to operate on a fair number of harelips, a deformity which is frequent in the region. To render these interventions more effective, they have asked the ICRC to supply them with special instruments.

Relief to refugees and the disabled.—Over and above the distributions made in the Kontum area, the ICRC has had relief reach refugees at Dinh-Tuong near Saigon. This has consisted chiefly of rice, milk and cloth. Other distributions are at present being made in orphanages in Saigon and certain places in the delta. The beneficiaries will receive milk sent from Switzerland by the ICRC, as well as various food and medical relief supplies offered by the Red Cross Societies of the Netherlands and Federal Germany.

Furthermore, the ICRC delegation is undertaking the last stages of the establishment of the “Reception Centre for Civilian Disabled” in Saigon. Even before this work was finished, six disabled had already received treatment.

Visits to detainees.—The ICRC has recently carried out two visits to places of detention in which there were persons arrested as a result of the events. Shortly before his return to Switzerland, Mr. Alain Modoux, delegate, visited the prison at Da-Nang where some sixty political prisoners were incarcerated. Shortly afterwards, another delegate, Mr. A. Tschiffeli visited the Consom penitentiary on the island of Poulo Condore where some 3,650 persons were interned. He spoke without witnesses with five of them and, as is customary, he submitted various proposals after his visit to the director of the penitentiary with a view to having detention conditions improved.

India and Pakistan

The delegate of the International Committee in India and Pakistan, Mr. Max Stalder, is at present organizing distribution of the remaining relief supplies intended for the victims of the recent conflict between these two countries. For this purpose he went to Rajouri in the State of Jammu and to the Indian controlled part of Kashmir, where he made final arrangements for a distribution programme in close co-operation with the authorities, with the Indian Red Cross, and especially with Col. Hiranand Dubey, President of the local section of the Red Cross. Many people from villages, who had lost all their possessions and who had been made homeless during the hostilities of August and September 1965,

were concentrated in this region and the ICRC delegate handed them part of the 416 bags of clothing offered by Sweden, Switzerland and Canada. A number of villages in the region were included in the distribution programme.

Mr. Stalder then went to Pakistan where a similar mission awaited him. He plans to attend various distributions of relief in Azad Kashmir under Pakistani control.

IN GENEVA

Exchange of views on the position of prisoners

Ambassador Averell Harriman, personal representative of the President of the United States, was received, at his request, on May 6, 1966 by Mr. Samuel A. Gonard, President of the International Committee of the Red Cross. The meeting bore on the position of prisoners of war in both North and South Vietnam.

The day before, the ICRC President had met U Thant, Secretary-General of the United Nations, who emphasized the importance of the task devolving on the ICRC to improve the lot of prisoners of war in Vietnam.

New participation in the Geneva Conventions

The Federal Political Department in Berne has informed the ICRC that it has received the instrument of accession by the Republic of Honduras to the four Geneva Conventions of August 12, 1949. This accession will take effect on June 30, 1966.

This event causes satisfaction to the International Committee and its President has written to the President of the Republic as well as to the Minister of Foreign Affairs of Honduras congratulating their country on thus shortly becoming the 109th State formally participating in the Geneva Conventions of 1949.

Twentieth Anniversary of the International Tracing Service

In one of its previous numbers, the International Review mentioned that the International Tracing Service (ITS) had in 1965 celebrated its 20th anniversary of existence and that this also marked ten years of the ICRC's presence at Arolsen. We also gave some figures which showed a constant increase in inquiries reaching Arolsen between 1951 and 1965, about 1,900,000 in all. It can already be seen from annual statistics, that even twenty years after the end of the war, the public still has to resort to the ITS to obtain information and documents. We would moreover recall that on June 30, 1965 that Service numbered 234 on its staff.

In order to celebrate this anniversary and give as general an idea as possible of the work accomplished, the ITS has now produced a brochure in French, German and English of some thirty pages which contains interesting details about the documents in its possession, information it supplies in the use of these documents and also on the special methods of work.

The utilization of these documents often places the ITS in difficult situations which other tracing services probably do not have to encounter. These therefore merit mention as well as the methods applied to resolve them. This brochure gives technical details and in particular how identification can be made of persons from the documentation and what observations lead to working on the latter. It also contains reproductions of various items such as a "Certificate of Incarceration", "Certificate of Residence" and "Excerpt from Documents about the stay in former concentration or labour camps", etc...

We think it will be of interest to give some additional information and we now produce the two first chapters of the brochure on the ITS, edited by the International Committee.

The International Tracing Service is this year looking back on twenty years' of activity. The disastrous events which made it

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necessary to establish such a tracing service are only too well known. In deference to the unfortunate victims it would be inappropriate for the ITS to commemorate this occasion particularly. It will only be attempted here, in fact for the first time, to give a more general picture of the ITS' activity in the form of a concise study. Hitherto the ITS had only shown its current work in the periodical activity reports.

A brief outline of the ITS' origin seems necessary in order to characterize the present organization.

Towards the end of World War II, a small tracing service dealing mainly with individual cases had been attached to the Supreme Headquarters of the Allied Expeditionary Forces in Europe. Its main task consisted in the co-ordination of the tracing of missing persons in the territory already occupied by the Allied Nations. When, after the cessation of hostilities UNRRA transferred its Headquarters for Germany to Arolsen, this tracing service was attached to it ¹. This explains the present location of the ITS.

One of UNRRA's tasks consisted in assisting DPs, i.e. nationals of member countries of the United Nations who had been forced by the war to leave their country, and to facilitate the return to their home. It was also one of UNRRA's tasks to assist DPs in tracing their relatives from whom they had been separated as a result of the war. To this end UNRRA expanded the tracing service mentioned above, which was then called the "Central Tracing Bureau". In view of the fact that this bureau did not yet possess the documents which formed the later ITS' archives, it could only co-ordinate the tracing between the National Tracing Bureaux on one hand and the tracing services of the different zones of occupations of Germany on the other hand. In 1948, when most of the DPs wishing to return home had been repatriated, UNRRA was dissolved and replaced by a new organization of the United Nations, the IRO, which dealt with DPs who did not wish to be repatriated. The IRO's task consisted in assisting DPs and in

¹ Abbreviations used in this article :

CC — Concentration Camp.

DP — Displaced Person.

IRO — International Refugee Organization.

UNRRA — United Nations Relief and Rehabilitation Administration.

facilitating their emigration. This organization called its tracing service ITS ; the name it has kept until today. In 1951 already, the IRO, having completed its mandate to a large extent, was dissolved in its turn.

IRO's Tracing Service was taken over by the Allied High Commission which functioned until May 1955 when, as a result of the abrogation of the statute of occupation in the Federal Republic of Germany, new dispositions had to be taken with regard to the ITS. The International Committee of the Red Cross in Geneva was then entrusted, in agreement with an International Commission for the ITS, formed by representatives of ten member nations, with the direction and the administration of the ITS.

ITS documents.—At the outset, neither the Central Tracing Bureau nor the succeeding ITS had any documents at their disposal upon which they could have based their tracing. Only in 1948 the ITS received some of the documents which the Allied Forces had secured on the closure of various CCs and which had until then been available to the Nuremberg Tribunal for War Crimes. Shortly before the disbandment of the IRO the " War-Time Documents " (cf. page 3) were added. The " Post-War-Time Documents " (cf. page 3) i.e. the records of the DPs established by UNRRA and IRO, reached the ITS only later, when the IRO had been dissolved.

Whilst UNRRA dealt exclusively with DPs, the IRO was concerned in addition to the DPs in the strictest sense also with refugees who reached the Federal Republic of Germany or Austria coming from Eastern Europe from the end of the war until 1951.

The archives of the ITS are divided into three sections according to subject matter as follows :

1. *CC-Documents*

These records comprise lists and individual documents of prisoners from CCs which existed from 1933 to 1945 in the territory of the former German Reich and in occupied countries. There are lists of arrival in camps, lists for the issue of prisoners' numbers, deportation lists of persons directed from occupied countries and from Germany to various destinations, lists of liberation established

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by the Allied Forces ; individual documents such as prisoners' questionnaires, prisoners' cards, records of personal effects withdrawn from the prisoners at entry into the CC, infirmary cards, working-and post control-cards.

The archives comprise as well some card-indices from certain Gestapo offices in Germany and a small number of files from the People's Courts (Volksgesichte).

These documents provide for all intents and purposes the following information : place and date of arrest, duration of detention in the CC, reason given for detention (political, racial etc.), general state of health on arrival in the camp, diseases and wounds contracted during detention, type of forced labour, transfers to work commandos or to other CCs and, where applicable, releases, liberations or death. Some individual documents contain, in addition, information on near relatives who were also detained in CCs and of personal effects withdrawn from the prisoners.

The Historical Section is closely connected with the CC-documents. It comprises the records with general data on CCs and analogous subjects. They are currently consulted in order to answer general questions on detention etc.

This section has also a small reference library at its disposal concerning National Socialist persecution and geographical matters, maps and gazetteers.

2. War-Time Documents

These documents concern non-Germans who lived from 1939 to 1945 outside CCs or Prison-of-War camps in Germany, mainly on the territory of the present Federal Republic. These documents are in fact excerpts from war-time records established shortly after the war by German authorities by order of the Occupying Powers. The sources of information were registers for foreigners, documents drawn up by employers, by insurance offices, hospitals, by the police or by prisons etc.

The following types of information are provided by this documentation : place and length of stay, employers, invalidity insurance, medical treatment, detention in civilian prisons. Death cases are found in notes from civil registers or in grave lists.

3. Post-War-Time Documents

They give information on DPs who lived, mainly from 1945 to 1951, in the Western zones of occupation of Germany and Austria. The greater part of these records was established by UNRRA and IRO.

The documents contain information on places and dates of residence after the war, sometimes for the past ten years including persecution during the war. There are also medical reports and information on hospital treatment. Special questionnaires provide information for the examination as to the eligibility for IRO assistance. These forms show also where whole families lived during the war, what education they had received and where they had worked. These items can be used as an indirect proof for detention etc. during the war in connection with indemnification claims.

The Child Tracing Section is in fact a sub-section of the Post-War-Time Documents. Here the files are gathered of DP-children who were separated from their parents during or after the war. These records contain detailed information concerning not only the identification and the fate of the child itself during the war but also of its nearest relatives. Therefore, these records can frequently be consulted for inquiries precisely about these relatives.

The three sections of the ITS' archives comprise approximately 2½ million pages of lists and more than 8 million individual documents.

The ITS is not only obliged to maintain its archives in good order, within the limits of its attribution, it should also extend them through new acquisitions. In order to ensure the good condition of the documents they are covered mechanically on both sides with plastic sheets. An inventory in the form of a card-index assures that every record can easily be found. New acquisitions during the last ten years have increased the volume of the CC documents by one third and that of the Post-War-Time documents by a quarter.

In order to treat a case, all records referring to the person in question, must be consulted from one or more of the archives' sections. Individual records can be filed alphabetically, but what about the over 2 million pages of lists? The ITS had therefore to

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build up an auxiliary method which is the key to records in the three sections of the archives :

It is the master index with over 20 million reference cards. These cards give information on the person, on the respective record and the place where it is filed plus a summary of the content of this record. The Master Index cards are classified according to a phonetic-alphabetical system. This method had to be adopted on account of the different spelling of names to be found above all in Slavonic and Oriental Jewish surnames which represent about 60% of the total. For each inquiry dealt with, with positive or negative result, an inquiry card is left in the Master Index as all information-cards referring to the case are kept in the individual case-file. These inquiry cards give in addition to the personal data and the reference number of the file, a summary of the alleged fate as mentioned in the inquiry. If, subsequently, the information-card referring to a newly acquired document, when inserted in the Master Index, encounters the relevant inquiry card, the result of this "meeting" will be communicated spontaneously to the inquirer.

Auxiliary indices to the Master Index had to be established in order to evaluate completely the content of the archives. The main auxiliary indices will be mentioned under "IV. Special working methods" (cf. page 9).

Information required from the ITS.—The criteria vary constantly, according to which archives are consulted. It depends on the type of questions put to the ITS which section of the archives is to be consulted. Certain sections such as the War-Time Documents came only recently into use on a large scale. The principal types of information required are mentioned below :

Tracing inquiries

Despite the fact that the tracing of missing persons forms today only about 10 % of the inquiries, this type of work is mentioned first as it was initially the main activity of the ITS and, last but not least, because "Tracing" forms part of the title of the ITS. First of all it must be stressed that the ITS does not, so to speak, trace anyone anywhere. Its tracing activity is restricted to the

scope of its archives. Only if a lead on a sought person is found in the archives is it followed up by addressing inquiries to other agencies. It must not be forgotten that the most recent information the ITS holds on a person dates from at least fifteen years ago. This information might be found on a list of the inmates of a DP-camp dissolved long ago or on an emigration list of the early fifties. Once such a lead is found the real tracing starts. It is done through the intermediary of various agencies and particularly through the National Red Cross Societies. The ITS respects the following principle : an address should never be disclosed to the inquirer without the formal consent of the person that was found.

Excerpts from documents

One must keep in mind that the content of ITS' archives generally cannot be confirmed by other sources. The CC and Post-War-Time records are unique. The sources for the War-Time documents have practically become inaccessible or have been destroyed. The circle of persons within the sphere of the ITS have, however, to produce for various reasons evidence of their detention, of the fact that they contracted diseases or received medical treatment at a given moment, or must just prove where they lived at a given time during a period which reaches from the beginning of the war to the immediate post-war time i.e. from 1939 to 1951. It must be remembered that these persons were not registered anywhere else during this period. In answer to such requests the ITS draws up excerpts of its documents on the appropriate form.

Today 90 % of the activity of the ITS consists in such excerpts in various forms. The main reasons for which these excerpts are required are given below :

Claims for compensation

For claims for compensation on account of National Socialist persecution, mainly the proof of detention in a CC, found in the respective section of the archives, is required. In 1949, according to compensation laws of some " Länder " of the Federal Republic of Germany, the first requests reached the ITS. Under the terms of the respective law of 1954 for the entire Federal Republic and to a much larger extent under the supplementary legislation of 1956

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these requests formed the majority of inquiries addressed to the ITS, reaching up to 80 % of the total.

From 1945 to 1951, DPs were not obliged to register with the German authorities. Therefore, they needed for their claims, in addition to the proof of their detention, evidence of their residence during the immediate post-war period. This information can only be secured from the UNRRA and IRO registration records.

The same type of evidence is requested by the ITS for indemnification schemes of other countries and of the UNHCR.

Evidence of physical injuries

Diseases and injuries are mentioned in the documents of all three sections of the archives. There are also to be found the results of medical inspections at the entry into a CC and on arrival in a DP-camp. Such medical records are required in order to substantiate claims for compensation for physical injuries according to the German indemnification law or for invalidity pensions of many countries. Even physicians ask for these records as a basis for their present treatment of a patient.

Restitution claims

Claims are lodged with the Federal Republic of Germany by former prisoners for valuables withdrawn from them in a CC. The necessary evidence can be found on the individual effects card where all personal property withdrawn from a prisoner in a CC is recorded.

Proof of employment and invalidity insurance

Foreigners who worked in Germany during the war had to be insured against accidents by their employers. More and more former workers need evidence, if possible, that they were insured or at least for which period and for whom they worked, when they reach the age to receive a pension. This evidence is required for German as well as for other insurance companies.

Emigration and nationalization

Former DPs require for these purposes excerpts from documents from the post-war-time archives in lieu of certificates of good conduct (polizeiliche Führungszeugnisse).

Proof of death

This evidence found in the three sections of the archives is necessary to solve legal questions according to civil law. There is a Special Registrar's Office in Arolsen which is authorized to register deaths of CC-inmates which occurred in the former German Reich or in German occupied territories. The necessary documentary evidence is put at the Registrar's disposal by the ITS.

Procedure of declaration of death

All courts of the first instance of the Federal Republic of Germany received instructions to submit to the ITS all requests for declaration of death concerning the circle of persons falling within the scope of the ITS. The ITS may then be able to furnish evidence not only of deportation or detention in a CC of the person for whom a declaration of death is required, but also the actual date and place of death which renders the action for declaration of death unnecessary. The ITS also examines all procedures submitted by the member nations to the United Nations International Bureau for Declarations of Death in Geneva.

General information on CCs etc.

Based on the above mentioned historical archives, general information is given on CCs and other camps and their organization.

In the years from 1949 to 1951, the ITS published a "Catalogue of Camps and Prisons in Germany and in German Occupied Territories from 1.9.1939 to 8.5.1945" of over 900 pages. This register shows camps of different categories from CCs to simple camps where foreign workers lived, in geographical order, i.e. subdivided into various countries; localities are indicated alphabetically and under each locality the camps or prisons which existed there. In contradiction to the catalogue's title, information on CCs goes sometimes back to 1933.

The second edition of this publication is already exhausted. The ITS, therefore, decided to prepare a revised and extended edition.

The old catalogue was based mainly on testimonies given by former prisoners, as the ITS had at that time practically no doc-

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umentation on the CCs at its disposal. It has been mentioned above to what extent the ITS' archives had been expanded since the catalogue was edited. Similar registers of camps had been established by some countries in the meantime which were also put at the disposal of the ITS.

In the first instance, with the assistance of a historian, a wider scheme was drawn up within which the new edition of the catalogue should be expanded. Preference was now to be given to documentary evidence as against the testimonies.

Thereupon all sections of the archives including the historical one were to be checked for evidence to be included in the catalogue. The photocopies of the relevant documents are collected thematically. This work will soon be terminated. It was surprising how much new or more precise data was found in the personal documents of the three sections of the archives. Not only exact dates of opening or closure of CCs and their commandos were established, but also important movements during a camp's existence and previously unknown work commandos could be ascertained.

In a third phase this documentation will have to be sifted, some (still uncertain) questions will have to be elucidated and finally excerpts will have to be established according to the scheme mentioned above.

The new catalogue will not only give more ample information, many errors of the old one will be rectified. Historical institutes of several countries already give valuable assistance to the ITS. The exact geographical location of each town or village to be mentioned in the catalogue has to be ascertained. A specialized group is entrusted with this complicated work.

This last phase of the preparatory work of the catalogue, the sifting of the documentation and extracting therefrom the necessary data, is still in its initial stage. However, as all documents concerning one camp are filed together, specific inquiries on a given camp can already now be answered according to the ITS' most recent data. In fact quite a number of such requests are received currently.

IN THE RED CROSS WORLD

WORLD RED CROSS DAY

The *International Review*, in its March issue, recalled the significance henceforth attached to the anniversary of Henry Dunant's birth and it mentioned the various events which took place in Geneva and in many countries to celebrate May 8 in 1965.

The commemoration of World Red Cross Day was a great success again this year. As is known, the theme was "No frontiers for Red Cross"; it was an opportunity to celebrate a work of humanity which should be extended to all men in all countries. We will revert to this event when we receive information from National Societies on how it was celebrated. We can already bring to our readers' attention the following message which the ICRC received from the Vatican over the signature of Cardinal Cicognani :

On the occasion of World Red Cross Day, the anniversary of Henry Dunant's birthday (May 8), the Sovereign Pontiff congratulates the Red Cross for its unfailing efforts in favour of the great cause of suffering humanity and of peace; he readily assures the Red Cross of divine blessing for all its peaceful work and he sends his best wishes to all who support it.

In addition, the leaders of the International Red Cross sent messages on May 8, 1966, to 106 National Red Cross, Red Crescent and Red Lion and Sun Societies. These messages which were widely covered by the press and radio are given below :

Mr. Samuel A. Gonard, President of the ICRC :

The help given by the Red Cross seems to us to be entirely natural today, as if it can always be expected whenever some calamity arises.

However, if Red Cross aid is so readily accepted, one is apt to forget to what extent the movement's promoters had to overcome apathy,

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scepticism and often even hostility, to have their ideal of humanity accepted. It was only many years after its foundation that the Red Cross was able to show of what it was fully capable and become what it intends to remain, namely an instrument always available to the fellowship of man.

It is not always realized either how difficult and multiple are the crises which men and women of the Red Cross still have to face today in accomplishing their task, especially when this involves aiding the victims of a conflict. Their efforts sometimes encounter a regrettable lack of understanding.

The history of the Red Cross, of the International Committee in particular, is marked by such episodes which are an extension, in spite of technical developments, of the courageous undertakings of the last century. They demand the same faith, courage and tenacity.

The experience of history has also shown that no government or authority ever had cause to regret having opened its frontiers to the Red Cross. That is why, when celebrating this World Day of 1966, the International Committee expresses the wish that the Red Cross, a movement which is more universal than any other, may see the last barriers fall which here and there in the modern world still obstruct its beneficent actions.

Mr. José Barroso, Chairman, League of Red Cross Societies :

On 8th May, all of us who are privileged to play a part in the world's greatest adventure in humanitarian service will pay homage to the founder of Red Cross. Born this same date 138 years ago, Henry Dunant inspired our 1966 theme, "No Frontiers for Red Cross." Today not only governments and international organizations but men and women of every country see not only the value but the absolute necessity of recognizing the principle of universality as visualized by Dunant. "Above all nations is humanity," he cried to the world. "All men are brothers." This cry heard first at Solferino, has since echoed and re-echoed from every corner of the world. Henry Dunant's influence on the moral advancement of our world is beyond measure. We will do his memory honour, we will serve our cause well if we will use World Red Cross Day as a platform to restate in all possible ways our understanding of the universality principle.

Mr. Henrik Beer, Secretary-General of the League of Red Cross Societies :

In its narrowest sense, Red Cross is an idea around which we have built an organizational structure. In its widest sense, Red Cross represents the only ideal to which all men everywhere can subscribe without violating other allegiances.

There is no doubt that ours is the most universal of all organizations, but we must question whether we are taking full advantage of this factor of universality. Our symbol for World Red Cross Day is a bridge. A bridge is not a resting place ; it is a means of crossing more easily over difficult areas. Never before in history has Red Cross been faced with such monumental problems. Yet never before have we been as confident as we are today.

We must remember that each of us has an influence not only in our communities and nations but throughout our world. This is the greatness of Red Cross. Our hope for World Red Cross Day 1966 is that we can communicate to all in our areas of influence the true meaning of " No Frontiers for Red Cross."

In addition, and for the seventeenth time in succession, an important International Red Cross radio broadcast took place on the evening of May 8, with participation by the main European countries. It was presented by the Swiss Broadcasting Corporation and produced, like previous broadcasts, by Mr. Georges Hardy.

In order to keep the initial announcement short, certain countries were asked to present a group of countries. For example Paris spoke on behalf of the French-speaking countries and Madrid of the Spanish-speaking countries.

Then a short musical work was broadcast from Geneva for all the radio stations taking part in the broadcast. This work was sung by a choir " a cappella " ; the words, sung in several languages, evoked the fundamental principles of the Red Cross as adopted last year in Vienna. This music was composed specially for the occasion by the Swiss composer Julien-François Zbinden and was performed by the choir of the Swiss Broadcasting Corporation.

The broadcast also included a report by Pierre Ichac dealing with the special tasks facing an African Red Cross Society, in this instance the National Society of Senegal.

IN THE RED CROSS WORLD

The Berne Studio of the Swiss Broadcasting and Television Corporation presented a programme in German on the theme "The Red Cross helps you ; help the Red Cross ", during which two ICRC delegates being interviewed described certain of their humanitarian interventions in India, Pakistan and Vietnam.

For transmission by the Swiss short-wave studio, Mr. L. Tschannen, Head of the English Language Department of the European and Overseas Service, Swiss Broadcasting Corporation, prepared a programme which was relayed eight times in five languages to all continents, during the day and night of May 8, 1966. This programme included the messages from Mr. S.A. Gonard and Mr. H. Beer, mentioned above.

The League of Red Cross Societies also arranged a radio programme on the World Day theme " No frontiers for Red Cross " ; it was an illustration of our movement's fundamental principles. It recalled various Red Cross actions in time of war and in time of peace ; the voices of several ICRC and League delegates were heard as well as those of spokesmen for National Societies and also the testimony of a former detainee. The programme was recorded and sent to the English, Spanish and French-speaking Red Cross and Red Crescent Societies.

On the same day the Swiss French-speaking television network presented a film on Henry Dunant. This was produced jointly by the Bavarian, Austrian and Swiss Television Corporations from a scenario by M. Vitali. The film portrayed the life and work of the founder of our movement, from his birth in Geneva until his last days in the hospital at Heiden. Finally, we may mention that in all countries the press participated in this great anniversary and that various national radio and television programmes were based on documents and information sent from Geneva, thereby manifesting once again the unity and universality of the Red Cross.

THE SPECIAL POSITION OF THE RED CROSS

Mr. A. van Emden, Director-General of the Netherlands Red Cross, has produced an interesting article concerning the special position which the Red Cross occupies amongst other humanitarian institutions. This article has appeared in Panorama, the Review of the League of Red Cross Societies and also in the Netherlands Red Cross Review and which we think will be of interest.

The Red Cross prevents and alleviates human suffering in time of war as in time of peace, irrespective of class, race, nationality, religion, political beliefs or any other criterion, solely on the basis of humanitarian principles. This line of conduct has been and still is being followed daily in many different situations, for despite outstanding progress in different spheres and all that has been achieved by modern techniques and growing civilization, present-day society still desperately needs help in relieving human suffering.

The Red Cross constantly provides such aid, sometimes discreetly, sometimes in a more spectacular way, but always in accordance with the basic principles governing Red Cross work.

As a result most countries recognize and appreciate the position of our organization. This is undoubtedly the case where the Red Cross has gradually become a part of everyday life and has had time to organize its activities. However, in some cases, especially in countries where public health and social services have reached a certain level, the Red Cross is looked upon simply as one of a number of organizations engaged in such work. Here it should be emphasized that the Red Cross acknowledges and admires the achievements of other bodies and in no way considers itself superior. Nevertheless its position is special and even unique, and the following points deserve underlining :

Its impartiality.—Many organizations working in public health, social welfare or other fields, owe their origin to the initiative of

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specific groups and may in the course of their work exercise a certain discrimination as regards, for example, religion or philosophical ideas. The Red Cross, by its very principles, is precluded from any type of harmful restriction towards those needing relief.

Its flexibility.—In nearly every country the Red Cross carries out quite a wide range of activities, but takes care, and we believe rightly so, not to encroach in areas where one or several other social organizations are already at work. Just as clearly, of course, the Red Cross by its nature cannot refuse any task falling within its competence, as this would be prejudicial to those who had turned to it for special assistance.

Its international strength.—The Red Cross Societies throughout the world are united in an international organization. This constitutes a link between the National Societies, which often, in the event of major disasters for example, give each other valuable assistance. In addition it enables the exchange of experience to everyone's benefit, either directly or through its publications, and is also designed to stimulate and co-ordinate.

Its duties under the Geneva Conventions.—The four Geneva Conventions confer very specific duties on the Red Cross in time of war or threat of war. For these to be satisfactorily performed, it is obviously necessary to make preparations in peacetime particularly by the purchase and maintenance of equipment, the training of personnel and negotiations with the Army medical service.

Its volunteer workers.—The Red Cross relies, often much more than other organizations, on a large number of volunteer workers. The volunteer system strengthens the bonds between personnel and the Red Cross and helps enlist public sympathy. This is important because the Red Cross must frequently appeal to the generosity of the public if it is to do its work well and continue to develop.

Its appeal to youth.—The Red Cross incorporates young people in its activities by assigning specific tasks to the Junior Red Cross, for instance training for the promotion of health, friendship and

service. Some countries have a junior organization with individual members ; in others there is simply a programme in which clubs or schools co-operate. In both cases the main purpose is to familiarize young people with the work and ideals of the Red Cross and give them the opportunity to participate in certain activities. A closer knowledge of the Red Cross and its principles will lead many of them to join their seniors when they grow up and eventually take over the work.

The special position of the Red Cross among other humanitarian organizations is clearly recognized in some countries but less so in others. It is important for us that each National Red Cross Society should endeavour to consolidate this position in the whole social organization of its country. Exchange of experience in this respect can be a useful contribution to international contacts.

This special position of the Red Cross raises the question whether after all it can establish close relations—and even collaborate—with other bodies whose aim is also the alleviation of human suffering. We would answer : yes. Both contact and collaboration are desirable and valuable. But the Red Cross can never forget that it must preserve its neutral attitude, an imperative which is not always fully understood by others and is even sometimes regarded as an unwillingness to collaborate.

This situation, though regrettable in itself, in reality confirms the special position of the Red Cross. I hope that this brief review of that position, particularly in relation to other organizations with humanitarian aims, may help to reduce and even eliminate some of the misunderstandings which exist. The whole sector of humanitarian assistance stands to gain.

Algeria

On January 29 last, the Second General Meeting of the Algerian Red Crescent Society, in Algiers, was attended by a number of dignitaries, including representatives of the Ministries of Health, Social Affairs, National Defence and Foreign Affairs. It was opened by Mr. Mustapha Kermia, the Chairman, who read out the National Society's report for the period from January 1, 1964 to December 31, 1965.

The following extract from that report illustrates the enterprising spirit and constant development of the Algerian Red Crescent.

Sewing workshops.—Almost 80 sewing workshops—or one to each administrative district—have been set up and are operating in a manner as satisfactory as possible, most of them with machines, material and accessories provided by the Swedish Red Cross and partly by the Swiss Red Cross. These workshops, according to reports by those in charge and observations made during visits, are basic in the training of young girls leaving school prematurely. They are highly appreciated by parents and it soon became obvious that they would have to be increased in number.

With an average attendance of some thirty girls per workshop, under the guidance of voluntary tutors, the responsible committees were not long in applying for additional equipment and accessories. In response to our request, the Swedish Red Cross, in 1956, sent us 150 machines and a large quantity of material. For 1966, following further discussions, another consignment of machines and material is planned. In theory, courses are of one year's duration, but in general there is no definite limit ; apart from cutting and sewing, the girls also learn knitting and many of them also follow courses in hygiene and home nursing.

Training of First-Aiders.—One of the basic activities worthy of attention and to which particular care must be given in view of

its wide scope, is the training of first-aiders and first-aid instructors. Our aim is continuously to turn them out so that they may be found even in the most remote regions of the country. Thanks to strict training according to the requisite standards and to periodical refresher courses, their ability to intervene can be made efficient and appreciated, especially in the event of disaster and during health campaigns. Four of our instructors were trained at St. Ours in France by French Red Cross specialists. They have been put in charge of the Red Crescent refresher courses and are available to departmental committees during school holidays. Thirty courses were attended by 546 candidates, 474 of whom successfully passed the examinations. It should be pointed out that first-aid courses are taken not only by young men, as may be thought, but also by adults and young women.

Junior Red Crescent.—Officially inaugurated by the Junior Red Crescent seminar, our junior section is led by adults well versed in the problems to be met. In several departments it has developed well, particularly in Tizi-Ouzou, Mostaganem, Tlemcen, Algiers, Annaba and Constantine. Teams have been formed and, together with the first-aiders, they have engaged in many activities in such fields as health and hygiene campaigns, re-afforestation, beach safety, illiteracy eradication, relief, blood collection, vaccination, etc. Our aim is to establish within each local branch a junior section to study, in co-operation with the Junior Red Cross Bureau of the League and with Juniors of Sister Societies, problems which are of concern to it and also new fields of activity.

Medical actions.—Field work normally co-ordinated by departmental health authorities is frequently undertaken by Algerian Red Crescent doctors, first-aiders and juniors, as part of vaccination and hygiene campaigns and also in the struggle against trachoma and tinea.

Also in this sector can be included the work of our ambulances and utility trucks, which between them handle, inter alia, the conveyance of injured and sick to hospital. Emergency arrangements are organized to cope with various events, such as the Algiers International Fair. We would also mention the circumcision of some

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thousand needy children and children of war heroes by Red Crescent doctors in all "Départements".

Kindergartens.—The Society has two kindergartens, one at Tizi-Ouzou and one at Constantine. A small fee is charged as a contribution to expenses. It would be worthwhile to increase their number, particularly in the towns, where the need for them is ever more acute. A study should be undertaken, in conjunction with municipal authorities in order to set up a co-operative scheme for the training of instructresses and to adopt a system of management.

Assistance to the aged.—As auxiliaries to local authorities and, need it be stressed, acting with their agreement, our departmental committees, within the limits of their resources, run homes where the aged may find shelter and the fellowship to which they are entitled. We are pleased to underline the interest aroused by this activity, as shown by the National Defence's recent donation to the Constantine committee of large premises for this purpose.

Soup kitchens.—These were initiated by the departmental committees and having become widespread are now also operated by some local committees. Opened originally during the month of Ramadan, it is not unlikely that they will also operate in winter, especially as the scheme is supported not only by the local authorities but also by many Management Committees, groups, businessmen and volunteer workers.

Distribution of donations received.—After receipt at the central depot, donations in kind from Sister Societies of the Red Cross and Red Crescent as well as from various international bodies, are sorted before distribution. We could of course mention the names of donors, but we would confine our remarks merely to saying that the active solidarity and generosity of all of them deserves our gratitude. We would, however, make a point of mentioning especially the Swedish Red Cross, the Alliance of Red Cross and Red Crescent Societies of the USSR, and the "War on Want" organization. The quantity of goods distributed, some 1,600 tons, was valued at approximately 10 million Dinars.

Assistance to organized groups.—This is daily becoming more developed, but here too the Algerian Red Crescent can only intervene to the extent its resources allow, to meet the needs of associations of former Moudjahiddines, war widows, children's homes, orphanages, schools, P.M.I. centres, homes for the aged, holiday camps, nursing centres, penitentiaries, etc.

Disaster relief stocks.—There is a standing reserve of goods, comprising tents, blankets, clothing, soap, foodstuffs, etc., which may be used only to meet disaster. Some commodities are replaced as and when fresh stocks are taken into store. Such stocks as tents and blankets and, in general, anything connected with the storing and utilization of disaster relief ought to be the subject of discussion with the Ministry of Social Affairs, which has already been informed, and with the Civil Defence Service. In our opinion the Civil Defence should take over the organization and centralization of relief stocks. We have been led to this conclusion by observations made during the more recent disasters.

Constantine Orthopaedic Centre.—One of the most outstanding of our activities is undoubtedly the Constantine Orthopaedic Centre, the equipment and specialists for which are provided by the Swedish Red Cross and which is operated by the Department Committee. The importance of this Centre is obvious. To date 300 amputees, including many children, have been admitted, fitted with artificial limbs, trained and returned to their families. Some 800 persons on the Algero-Tunisian frontier have registered for admission and are awaiting their turn. Unfortunately this figure is not final ; in spite of orders and security measures by local authorities and the removal of mines by the government, fresh victims are continually being reported. Negotiations with the Swedish Red Cross give reason to hope that it will be possible to treat a greater number of casualties in 1966 by setting up at Souk-Ahras a consultation clinic to take impressions of properly performed amputations, so that only cases requiring a second operation need be sent to Constantine.

With a view to relieving the Swedish team at the end of its tour, an agreement has been reached, and approved by the Ministry of

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Health, enabling a doctor to go to Stockholm for special training, at the invitation of the Swedish Red Cross. Concomitantly, five young Algerians are being trained at Constantine by Swedish specialists. We are pleased to pay a tribute to the members of the Constantine committee for their determination and faith, in spite of the difficulties encountered. We should also mention the members of the Souk-Ahras committee for their dedication, their liaison and co-ordination work.

Palestro hospital.—Following a visit to Algeria in 1964 by a delegation of the Alliance of Red Cross and Red Crescent Societies of the USSR an agreement will soon be signed, with the approval of the Ministry of Health. This agreement provides for the equipping of a 200 bed hospital at Palestro and the delegation of 17 doctors who will work at the hospital for three years. In point of fact seven Soviet doctors are already on the spot. The official opening of the hospital is scheduled for the beginning of May 1966, and its management will, of course, be the responsibility of the Ministry of Health.

School for the Blind.—So far unheralded, credit for establishing this school is due to the Batna department committee which, in view of the problems of blind young people, took the initiative. It was assisted in the task by the authorities and by a willing public. Some twenty pupils take regular courses in Braille, given by a voluntary tutor.

Lebanon

The Lebanese Red Cross has informed us that it had taken over the production in Arabic of a work on the Red Cross and the Geneva Conventions. This book, written by Mrs. Najla S. Saab, Secretary of the National Society has now appeared with a preface by Mrs. Issa-el-Khoury, herself President of the Lebanese Red Cross, which has had it distributed in all Arabic countries.

Mrs. Issa-el-Khoury has given the ICRC the general plan of this most useful work which appears to us to give a very wide and complete view of the problems facing our movement today. We therefore have thought it to be of interest to reproduce this plan and add that a special report on the activities of the Lebanese Red Cross has been distributed to officer cadets, together with the Resolutions of the XXth International Conference. These resolutions have been translated into Arabic and commented upon by the National Society.

Chapter I

Origins of the Red Cross, the International Committee and the First Geneva Convention.

Development and evolution of ICRC activities. Founding of the League of Red Cross Societies. The three other Geneva Conventions.

Work of the International Committee of the Red Cross : refugees, internal conflicts, reuniting of families, medical care, relief, the Red Cross and Civil Defence, protection of the civilian population, humanitarian law, Red Cross principles, the Red Cross and peace.

Chapter II

1. — What are the Geneva Conventions?
2. — The contents of the four Geneva Conventions.

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3. — Rôle of the Red Cross in the Geneva Conventions.
4. — Articles of the Conventions concerning the armed forces.

Chapter III

1. — Structure of the International Red Cross.
2. — The International Conference of the Red Cross.
 - The International Committee, its statutes, rôle and work.
 - The National Societies.
 - The League, its bye-laws, rôle and work.
 - The Standing Commission.
 - Relations between the International Committee and the League.

Chapter IV

The Lebanese Red Cross.

M I S C E L L A N E O U S

HOSPITAL PROBLEMS

At the XIVth International Hospital Congress held in Stockholm, Dr. M. G. Candau, Director-General of the World Health Organization, paid tribute to René Sand's work. The important rôle played in the Red Cross movement is well known and the International Review has published several studies of him, in particular one on the action of youth in the world and which he wrote when he was the League's technical adviser.¹ "That great humanist was among the first to realize the need of all mankind for medical care of the highest standard . . . He was one of the most influential pioneers in the field of social medicine and preventive medicine . . ." ²

We now give a résumé below of Dr. Candau's lecture in memory of René Sand. It deals with the vast and urgent problem of hospitals in the developing countries.

In the years that followed the Second World War very little information was available about the world's hospitals. Today a clearer picture of the situation is beginning to emerge, and it is very serious. About a third of the world's 3000 million people have access to scientific medical care services and, in particular, to well-equipped hospitals. The remaining two-thirds live in countries with rural populations amounting, in most cases, to 70%-80% of the total. Even supposing that in these countries the major towns possess hospitals giving an acceptable standard of medical care, this still leaves more than half the world's population with inadequate health protection.

Among this vast number of people the realization of what modern medicine can do for them is growing much faster than the medical facilities available to them; even in the regions where

¹ *Revue Internationale*, June 1935.

² *WHO Chronicle*, Geneva, November 1965.

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respect for traditional medicine is greatest, enthusiasm for modern medicine is developing explosively :

Wherever a new health centre is opened, crowds throng. They consist mostly of sick people peremptorily claiming to be treated . . . Many of them have travelled great distances and are in a particularly demanding frame of mind after the promises—sometimes very rash ones—that have been made to them . . .

Unfortunately, the reality does not often conform to the picture of contemporary medicine—let alone its institutions—that these populations have built up, for the existing facilities soon become overburdened :

Furthermore, as a result of circumstances that in some countries accompanied accession to independence, the potential of hospital care institutions has sometimes sunk dangerously low. With hospitals destroyed or in disrepair, fewer doctors, shortage of nurses, stocks of medicaments exhausted, technical equipment for diagnosis and treatment wearing out, the situation in many countries is more serious today than it was ten years ago.

The governments of many developing countries are in danger of being faced with an explosive situation, with increasing populations, the pull of cities, and improvements in communications all helping to swell the demand for medical care.

How are these problems to be solved ? Countries with grave economic difficulties and a serious shortage of medical, paramedical, and administrative staff cannot be advised to give priority to building hospitals. Yet, even in developed countries, only a visionary could imagine that hygiene and preventive medicine will ever abolish disease and make hospitals unnecessary. What therefore can be done about hospitals for the developing countries ?

The charitable institutions that have done so much good work in many countries find today that their traditional administrative structures are collapsing under the stress of social and technical development. Institutions deriving their resources from foundations and enjoying complete financial and administrative autonomy have now almost disappeared. One of the causes of this far-reaching change is the spectacular increase in running expenses :

The cost of hospital care is increasing appreciably faster than national incomes, and curative medicine represents in general 90 % of total expenditure on health. Of this enormous sum, hospital costs account for about half, the other half representing doctors' fees and pharmaceutical expenses.

The possibility of modifying conceptions of hospital care so as to keep its cost within the limits of budgets in the developing countries should be considered. Hospitals in these countries, although short of beds, contain a considerable proportion of the incurably sick, with the result that numbers of cases that could be cured have to be turned away. This situation arises because the criteria for admission are based on the gravity of the patient's case and not on the possibility of restoring his health. The disastrous consequences are that the effectiveness of the hospital from a public health point of view is very low, its technical equipment is under-employed, and its reputation in the eyes of the public is deplorable.

The trouble lies in the fact that the hospital today has two functions—it is, first, a scientific institution in which highly qualified staff use complicated and expensive equipment for the control of the growing number of diseases it is now possible to combat and, second, it has to fulfil an inherited social role :

... it is the hospital we think of in the case of mass disaster, but it is also the hospital to which we turn to deal with the many urgent individual problems that the social services can do nothing to solve ... it is ... to the hospital that we take the old man with no one to turn to, the person found sick in his apartment by neighbours, children temporarily or permanently abandoned, people who have tried to commit suicide, misfits of all kinds ... It seems that there is no way for the hospital to escape this obligation, but we must try to shorten as far as possible the stay of people with no serious illness or injury.

Hospital organization in the developing countries should therefore give priority to increasing the effectiveness of the services that already exist. Where it is indispensable to have new buildings, both speed of construction and adaptability to future conditions may be achieved much more cheaply by standardization techniques than by traditional building methods. There are good reasons for believ-

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ing that the standardization of hospital units is the best answer to a problem that *all* countries are facing :

Instead of erecting monuments that are costly to construct and complicated to maintain, we are clearly going to have to work out systems allowing for quick and easy construction of sections that can go into service as soon as they are completed . . . Another possibility is to construct modern buildings in which mechanical equipment such as lifts and air-conditioning is restricted at the outset but can be installed subsequently when adequate facilities for maintenance and repair are available. This line of thinking does not by any means lead to second-quality solutions. On the contrary, it would enable the developing countries to have establishments that would not be copies of luxury hospitals but would nonetheless be modern and functional and could be built on plots of reasonable size in towns where the price of land . . . is high.

Domiciliary care as a means of relieving pressure on hospitals is a promising solution for many developed areas, but in the developing countries its general application is unrealistic because of housing difficulties caused by the rapid growth of towns :

To give proper care to a patient in one wretched room inhabited by a whole family, or even two, without potable water and without sewage disposal is an impossibility. On the other hand, decentralization of dispensaries to the urban district, suburb and country-district level leads to effective screening of patients and reduces pressure of applications for admittance to hospital. Such dispensaries could with advantage be linked to the hospitals and act as advance posts for the out-patient services.

At the same time economically feasible schemes for accommodating incurable and long-term patients could be developed . . . The problem is not a simple one, but the aim should be to ensure that priority for beds in the best-equipped hospitals goes to patients who are curable and who can contribute to economic development by going back to work.

In adapting the existing system to work on these lines, efforts should first be concentrated on the regional hospital (where the best treatment can be provided and where future key staff are trained) and next on the rural health services. Certain intermediate-level hospitals and annexes to local hospitals could house long-term patients near their families.

A sound legislative and administrative framework is essential to determine exactly the functions of each element in the network of institutions for medical care. The decentralized dispensaries and hospital out-patient services, while providing ambulatory care, are also—because of the attraction they have for the population—the places where techniques of preventive medicine can develop :

Thus it seems we are abandoning once and for all the dichotomy between curative and preventive medicine and that the tendency today is towards the integration of these two aspects in the wider framework of the public health services . . . It is not just a matter of linking two administrations more closely together but of ensuring that the individuals who provide the motive force . . .—the doctors, both general practitioners and hospital specialists, the public health workers, the nurses and social workers—collaborate more closely . . . To achieve this object there must be a health programme at national level, there must be legislative provisions and health administrators to apply them.

The experience WHO has built up since its inception proves that plans and legislative systems must be adapted to the conditions of each country. Nevertheless, in all of them, planning in the health field must take into account the inter-relationship between the curative services and the preventive programmes. The hospital plan is in fact an integral part of the health plan :

I am therefore particularly glad to note that during your previous meetings you have tackled the problem of the role of the hospital in preventive medicine, and that for this year's Congress you have undertaken a study of the integration into the hospital of a complete mental health service. That is the kind of study the developing countries need . . . Most of the developing countries, at the time they attained independence, had no other choice but to go forward if they did not want to go back a hundred years. Moreover, the former administering powers had left behind an infrastructure that was in some cases considerable, especially in regard to hospitals. But this infrastructure had been planned several decades before, and if it had to be built again today it would be given a different form. Still, it exists, and the developing countries must make the most of the heritage. It is essential that, instead of following tradition without adequate means to do so, they steer the management of their national patrimony in a different direction. A huge effort of planning is required. To be ready for it they need surveys, documentation, intellectual tools . . . It is . . . the responsibility of all of us . . . to provoke thought among those who are henceforth in charge of their own destiny,

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and we should avoid proposing to them, let alone imposing on them, complicated solutions . . . excellent for countries with a vigorous and well-organized economy but unworkable in a different setting.

In developed countries, where the means are available to satisfy the demand for medical care, it has been found that the number of calls on the public health organization averages five to ten annually per head of the population. Every year at least one person in ten is hospitalized for an average of two weeks. This represents one and a half days in hospital annually for every member of the population. These are the minimum figures : we dare not yet estimate what would be theoretically justified in countries where sanitary, climatic, and nutritional conditions are such that a completely healthy individual is rare indeed.

Many years will elapse before most of the needs of the developing countries can be met. It can only be hoped that they will not reveal themselves in their fullness until it has proved possible to satisfy at least the most urgent among them.

EXTRACT FROM THE STATUTES OF
THE INTERNATIONAL COMMITTEE OF THE RED CROSS

(AGREED AND AMENDED ON SEPTEMBER 25, 1952)

ART. 1. — The International Committee of the Red Cross (ICRC), founded in Geneva in 1863 and formally recognized in the Geneva Conventions and by International Conferences of the Red Cross, shall be an independent organization having its own Statutes.

It shall be a constituent part of the International Red Cross.¹

ART. 2. — As an association governed by Articles 60 and following of the Swiss Civil Code, the ICRC shall have legal personality.

ART. 3. — The headquarters of the ICRC shall be in Geneva.

Its emblem shall be a red cross on a white ground. Its motto shall be "Inter arma caritas".

ART. 4. — The special rôle of the ICRC shall be :

- (a) to maintain the fundamental and permanent principles of the Red Cross, namely: impartiality, action independent of any racial, political, religious or economic considerations, the universality of the Red Cross and the equality of the National Red Cross Societies ;
- (b) to recognize any newly established or reconstituted National Red Cross Society which fulfils the conditions for recognition in force, and to notify other National Societies of such recognition ;

¹ The International Red Cross comprises the National Red Cross Societies, the International Committee of the Red Cross and the League of Red Cross Societies. The term " National Red Cross Societies " includes the Red Crescent Societies and the Red Lion and Sun Society.

- (c) to undertake the tasks incumbent on it under the Geneva Conventions, to work for the faithful application of these Conventions and to take cognizance of any complaints regarding alleged breaches of the humanitarian Conventions ;
- (d) to take action in its capacity as a neutral institution, especially in case of war, civil war or internal strife ; to endeavour to ensure at all times that the military and civilian victims of such conflicts and of their direct results receive protection and assistance, and to serve, in humanitarian matters, as an intermediary between the parties ;
- (e) to contribute, in view of such conflicts, to the preparation and development of medical personnel and medical equipment, in cooperation with the Red Cross organizations, the medical services of the armed forces, and other competent authorities ;
- (f) to work for the continual improvement of humanitarian international law and for the better understanding and diffusion of the Geneva Conventions and to prepare for their possible extension ;
- (g) to accept the mandates entrusted to it by the International Conferences of the Red Cross.

The ICRC may also take any humanitarian initiative which comes within its rôle as a specifically neutral and independent institution and consider any questions requiring examination by such an institution.

ART. 6 (first paragraph). — The ICRC shall co-opt its members from among Swiss citizens. The number of members may not exceed twenty-five.



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ADDRESSES OF CENTRAL COMMITTEES

- AFGHANISTAN — Afghan Red Crescent, *Kabul*,
 ALBANIA — Albanian Red Cross, 35, Rruga
 Barrikadavet, *Tirana*.
 ALGERIA — Central Committee of the Algerian
 Red Crescent Society, 15 bis Boulevard
 Mohamed V, *Algiers*.
 ARGENTINE — Argentine Red Cross, H. Yri-
 goyen 2068, *Buenos Aires*.
 AUSTRALIA — Australian Red Cross, 122-128
 Flinders Street, *Melbourne, C. 1*.
 AUSTRIA — Austrian Red Cross, 3 Gusshaus-
 strasse, *Vienna IV*.
 BELGIUM — Belgian Red Cross, 98, Chaussée
 de Vleurgat, *Brussels 5*.
 BOLIVIA — Bolivian Red Cross, Avenida
 Simon-Bolivar, 1515 (Casilla 741), *La Paz*.
 BRAZIL — Brazilian Red Cross, Praça da Cruz
 Vermelha 10-12, *Rio de Janeiro*.
 BULGARIA — Bulgarian Red Cross, 1, Boul.
 S.S. Birzov, *Sofia*.
 BURMA — Burma Red Cross, 42, Strand Road,
 Red Cross Building, *Rangoon*.
 BURUNDI — Red Cross Society of Burundi,
 P.O. Box 98, *Bujumbura*.
 CAMBODIA — Cambodian Red Cross, 17 R
 Vithei, P.O.B. 94, *Phnom-Penh*.
 CAMEROON — Central Committee of the
 Cameroon Red Cross Society, rue Henry-
 Dunant, P.O.B. 631, *Yaoundé*.
 CANADA — Canadian Red Cross, 95 Wellesley
 Street East, *Toronto 5*.
 CEYLON — Ceylon Red Cross, 106 Dharma-
 pala Mawatte, *Colombo VII*.
 CHILE — Chilean Red Cross, Avenida Santa
 Maria 0150, Casilla 246 V., *Santiago de Chile*.
 CHINA — Red Cross Society of China, 22,
 Kanmien Hutung, *Peking, E*.
 COLOMBIA — Colombian Red Cross, Carrera
 7a, Apartado nacional 1110, *Bogota D.E.*
 CONGO — Red Cross of the Congo, 24, Avenue
 Valcke, P.O. Box 1712, *Kinshasa*.
 COSTA RICA — Costa Rican Red Cross, Calle 5a
 Sur, Apartado 1025, *San José*.
 CUBA — Cuban Red Cross, Ignacio Agramonte
 461, *Havana*.
 CZECHOSLOVAKIA — Czechoslovak Red
 Cross, Thunovska 18, *Prague I*.
 DAHOMEY — Red Cross Society of Dahomey,
 P.O. Box 1, *Porto-Novo*.
 DENMARK — Danish Red Cross, Ny Vestergade
 17, *Copenhagen K*.
 DOMINICAN REPUBLIC — Dominican Red
 Cross, Calle Galvan 24, Apartado 1293
San Domingo.
 ECUADOR — Ecuadorean Red Cross, Avenida
 Colombia y Elizalde 118, *Quito*.
 ETHIOPIA — Ethiopian Red Cross, Red Cross
 Road No. 1, P.O. Box 195, *Addis Ababa*.
 FINLAND — Finnish Red Cross, Tehtaankatu
 I A, *Helsinki*.
 FRANCE — French Red Cross, 17, rue Quentin-
 Bauchart, *Paris (8^e)*.
 GERMANY (Dem. Republic) — German Red
 Cross in the German Democratic Republic,
 Kaitzerstrasse 2, *Dresden A. 1*.
 GERMANY (Federal Republic) — German Red
 Cross in the Federal Republic of Germany,
 Friedrich-Ebert-Allee 71, 5300 *Bonn 1*, Post-
 fach (D.B.R.).
 GHANA — Ghana Red Cross, P.O. Box 835,
Accra.
 GREAT BRITAIN — British Red Cross, 14
 Grosvenor Crescent, *London, S.W.1*.
 GREECE — Hellenic Red Cross, rue Lycavittou 1,
Athens 135.
 GUATEMALA — Guatemalan Red Cross, 3.^a
 Calle 8-40 zona 1, *Guatemala C.A.*
 HAITI — Haiti Red Cross, rue Férou, *Port-au-
 Prince*.
 HONDURAS — Honduran Red Cross, Calle
 Henry Dunant 516, *Tegucigalpa D.C.*
 HUNGARY — Hungarian Red Cross, Arany
 Janos utca 31, *Budapest V*.
 ICELAND — Icelandic Red Cross, Ølduggøtu 4,
Reykjavik, Post Box 872.
 INDIA — Indian Red Cross, 1 Red Cross Road,
New Delhi 1.
 INDONESIA — Indonesian Red Cross, Tanah
 Abang Barat 66, P.O. Box 2009, *Djakarta*.
 IRAN — Iranian Red Lion and Sun Society,
 Avenue Ark, *Teheran*.
 IRAQ — Iraqi Red Crescent, Al-Mansour,
Baghdad.
 IRELAND — Irish Red Cross, 16 Merrion Square,
Dublin 2.
 ITALY — Italian Red Cross, 12, via Toscana,
Rome.
 IVORY COAST—Ivory Coast Red Cross Society,
 B.P. 1244, *Abidjan*.
 JAMAICA — Jamaica Red Cross Society, 76
 Arnold Road, *Kingston 5*.
 JAPAN — Japanese Red Cross, 5 Shiba Park,
 Minato-Ku, *Tokyo*.
 JORDAN — Jordan Red Crescent, P.O. Box
 1337, *Amman*.
 KOREA (Democratic Republic) — Red Cross
 Society of the Democratic People's Republic
 of Korea, *Pyongyang*.
 KOREA (Republic) — The Republic of Korea
 National Red Cross, 32-3 Ka Nam San-Donk,
Seoul.

ADDRESSES OF CENTRAL COMMITTEES

- LAOS — Laotian Red Cross, *Vientiane*.
- LEBANON — Lebanese Red Cross, rue Général Spears, *Beirut*.
- LIBERIA — Liberian National Red Cross, Camp Johnson Road, P.O. Box 226, *Monrovia*.
- LIBYA — Libyan Red Crescent, Berka Omar Mukhtar Street, P.O. Box 541, *Benghazi*.
- LIECHTENSTEIN — Liechtenstein Red Cross, *Vaduz*.
- LUXEMBURG — Luxembourg Red Cross, Parc de la Ville, *Luxemburg*.
- MADAGASCAR — Red Cross Society of Madagascar, rue Clemenceau, P.O. Box 1168, *Tananarive*.
- MALAYA — Malaysian Red Cross Society, 519 Jalan Belfield, *Kuala Lumpur*.
- MEXICO — Mexican Red Cross, Sinaloa 20, 4º piso, *Mexico 7, D.F.*
- MONACO — Red Cross of Monaco, 27, Boul. de Suisse, *Monte-Carlo*.
- MONGOLIA — Red Cross Society of the Mongolian People's Republic, Central Post Office, Post Box 537, *Ulan-Bator*.
- MOROCCO — Moroccan Red Crescent, rue Calmette, *Rabat*.
- NEPAL — Nepal Red Cross Society, Tripureswore, P.B. 217, *Kathmandu*.
- NETHERLANDS — Netherlands Red Cross, 27 Prinsessegracht, *The Hague*.
- NEW ZEALAND — New Zealand Red Cross, 61 Dixon Street, P.O.B. 6073, *Wellington C.2*.
- NICARAGUA — Nicaraguan Red Cross, 12 Avenida Noroeste, *Managua, D.N.*
- NIGER — Red Cross Society of Niger, B.P. 386, *Niamey*.
- NIGERIA — Nigerian Red Cross Society, Eko Akete Close, Ikoyi, Yaba, P.O. Box 764, *Lagos*.
- NORWAY — Norwegian Red Cross, Parkveien 33b, *Oslo*.
- PAKISTAN — Pakistan Red Cross, Frere Street, *Karachi 4*.
- PANAMA — Panamanian Red Cross, Apartado 668, *Panama*.
- PARAGUAY — Paraguayan Red Cross, calle André Barbero y Artigas 33, *Asunción*.
- PERU — Peruvian Red Cross, Jiron Chancay 881, *Lima*.
- PHILIPPINES — Philippine National Red Cross, 860 United Nations Avenue, P.O.B. 280, *Manila*.
- POLAND — Polish Red Cross, Mokotowska 14, *Warsaw*.
- PORTUGAL — Portuguese Red Cross, General Secretaryship, Jardim 9 de Abril, 1 a 5, *Lisbon 3*.
- RUMANIA — Red Cross of the Rumanian People's Republic, Strada Biserica Amzei 29, *Bucarest*.
- SALVADOR — Salvador Red Cross, 3a Avenida Norte y 3a Calle Poniente 21, *San Salvador*.
- SAN MARINO — San Marino Red Cross, *San Marino*.
- SAUDI ARABIA — Saudi Arabian Red Crescent, *Riyadh*.
- SENEGAL — Senegalese Red Cross Society, Bld. Franklin-Roosevelt, P.O.B. 299, *Dakar*.
- SIERRA LEONE — Sierra Leone Red Cross Society, 6 Liverpool Street, P.O.B. 427, *Freetown*.
- SOUTH AFRICA — South African Red Cross, Cor. Kruijs & Market Streets, P.O.B. 8726, *Johannesburg*.
- SPAIN — Spanish Red Cross, Eduardo Dato 16, *Madrid, 10*.
- SUDAN — Sudanese Red Crescent, P.O. Box 235, *Khartoum*.
- SWEDEN — Swedish Red Cross, Artillerigatan 6, *Stockholm 14*.
- SWITZERLAND — Swiss Red Cross, Taubenstrasse 8, B.P. 2699, 3001 *Berne*.
- SYRIA — Syrian Red Crescent, 13, rue Abi-Al-Almaari, *Damascus*.
- TANZANIA — Tanzania Red Cross Society, Upanga Road, P.O.B. 1133, *Dar es Salaam*.
- THAILAND — Thai Red Cross Society, King Chulalongkorn Memorial Hospital, *Bangkok*.
- TOGO — Togolese Red Cross Society, Avenue des Alliés 19, P.O. Box 655, *Lomé*.
- TRINIDAD AND TOBAGO — Trinidad and Tobago Red Cross Society, 48 Pembroke Street, P.O. Box 357, *Port of Spain*.
- TUNISIA — Tunisian Red Crescent, 19, rue d'Angleterre, *Tunis*.
- TURKEY — Turkish Red Crescent, Yenisehir, *Ankara*.
- UGANDA — Uganda Red Cross, 17 Jinja Road P.O. Box 494, *Kampala*.
- UNITED ARAB REPUBLIC — Red Crescent Society of the United Arab Republic, 34, rue Ramses, *Cairo*.
- UPPER VOLTA — Upper Volta Red Cross, P.O.B. 340, *Ouagadougou*.
- URUGUAY — Uruguayan Red Cross, Avenida 8 de Octubre, 2990, *Montevideo*.
- U.S.A. — American National Red Cross, 17th and D Streets, N.W., *Washington 6, D.C.*
- U.S.S.R. — Alliance of Red Cross and Red Crescent Societies Tcheremushki, J. Tcheremushkinskii proezd 5, *Moscow*.
- VENEZUELA — Venezuelan Red Cross, Avenida Andrés Bello No. 4, Apart. 3185, *Caracas*.
- VIET NAM (Democratic Republic) — Red Cross of the Democratic Republic of Viet Nam, 68, rue Bà-Triết, *Hanoi*.
- VIET NAM (Republic) — Red Cross of the Republic of Viet Nam, 201, đường Hồng-Thập-Tu, No. 201, *Saigon*.
- YUGOSLAVIA — Yugoslav Red Cross, Simina ulica broj 19, *Belgrade*.